FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 1. Corporation Name N9500000147 (7)

CURRY FORD ROAD EAST HOMEOWNERS ASSOCIATION, INC.

1	FORD HOAD EAST HOM			i, inc			
Principal Place	of Business	Mailing Ad	Idress			a to break file ford, were oblig aber aden dan dan sote transmit	1 1407 1207
151 SOUTHHAL SUITE 230 MAITLAND FL 3		SUITE 230	HALL LANE FL 32751-7190				 /
	_					3. Date Incorporated or Qualified 05/01/1995 05/01/1996	ort
2. Principal Pi	ace of Business	2a. Mailing	Address			E07355038	ied For Applicable
Suite, Apt	#, etc.	Suite,	Apt. #, etc.			5. Certificate of Status Desired Fee Requ	ditional
City & State	9	27 City &	State		<u>-</u>	6. Election Campaign Financing \$5.00 Mg	
23		28				Trust Fund Contribution Added to	
Zip	Country	Zφ		Count	гу	8. This corporation has liability for intangible tax under s. 19	99.032,
24	26	29	30	<u> </u>		Fiorida Statutes Yes No 10. Name and Address of New Registered Agent	
	9. Name and Address of Curre	nt registered A	gent	8	1 Name		
CENTEX	REAL ESTATE CORPORATION			<u> </u>		ACK HANSON	
151 SOUTHHALL LANE				8	7746	ddress (P.O. Box Aumber is Not Acceptable) . Glow	P
SUITE 2				6	322	PASTOONA PLACE, SUCT	8-10C
MAJILAN	ND FL 32751			8	4 City	21.42.700 FL 65 32.5	§3
11. Pursuant	to the provisions of Sections 617.05	02 and 617,1508	, Florida Statutes,	the abo	ve-named	corporation submits this statement for the purpose of changing its receipting board of directors. I bereby account the appointment as re-	egistered
agent. I a	m familiar with, and accept the oblid	pations of, Section	617.0503, Floric	Statut	es.	oration's board of directors. I hereby accept the appointment as requestions the second secon	Jistoreu
SIGNATURE		W	_	94	C P	<u> </u>	
12.		ent and title if application DIRECTORS	le. (NOTE R	13.	gent signature	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
TITLE	DP OTTOET A	DINECTORIO	DELETE	1.1 TITLE			Addition
NAME	KNIGHT, PATRICK	•		1.2 NAM	E		
STREET ADDRESS	151 SOUTHHALL LANE, STE	. 230		1.3 STAE	ET ADDRESS		
City-St-ZiP	MAITLAND FL 32751			1.4 CITY	-ST-ZIP		
TITLE	DV	-	DELETE	2.1 TITL		D Change	Addition
NAME	COLWELL, DARRYL			2.2 NAM	E	151 SOUTHHULLAND #22	
STREET ADDRESS	151 SOUTHHALL LANE, STE	. 230		2.3 STRE	ET ADORESS	Manual And Blanch	
CITY - ST - ZIP	MAITLAND FL 32751		T priese		'-ST-ZIP	MATTER DISTORT SERVE	Addition
TITLE	DST MARTINE		☐ DELETE	3.1 TITLI		Change [Addition
NAME	MATTHAI, KAROLINE	2 000		32 NAM	-		
STREET ADDRESS	151 SOUTHHALL LANE, STE MAITLAND FL	. 230	,		ET ADDRESS		
CITY-ST-ZIP TITLE	MATERIA FL		DELETE	4.1 TITLE	'-\$T-ZIP	Change	Addition
NAME				4. 2 NAN		book Time	
STREET ADORESS					ET ADDRESS		
CITY-ST-ZIP			l		-ST-ZIP		
TITLE			DELETE	5.1 TITU		Change [Addition
NAME			ļ	5.2 NAM	E [
STREET ADDRESS			ļ	5.3 STRE	ET ADORESS		
DITY-ST-ZIP				5.4 CITY	-ST-ZIP		
TITLE			DELETE	6.1 TITL		Change [Addition
NAME				6.2 NAM	E		
STREET ADDRESS				6.3 STRI	ET ADDRESS		
CITY OT 7IP				SA DITU	_67_7ID		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

THE MID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Deview Proce & 0014163

FILED

May 13 1997 8:00am

Secretary of State